

Washington K-8 Academy Decline of Enrollment

Does your child live inside the Washington Academy school boundary?

Yes

No

If **yes**, and you are interested in opting out of the academy, please fill out the remaining part of this form.

If **no**, you do not need to fill out this form.

How do I decline enrollment from Washington Academy?

- Complete all sections and list information for each child eligible for the 2017-18 school year.
- All applications **MUST be signed by the child's parent/guardian** to be processed.
- Return to Washington Academy at 1031 5th Avenue **between April 5 – April 28**.
- Completion of this form declines ALL rights to enrollment at the Washington Academy.
- To return to Washington Academy an application would need to be submitted.

1st Student's Name: _____ **Birth Date:** _____
First Middle Last

Gender: ___F ___M **Current School:** _____ **Grade for 2017-18:** _____

****Please circle if your child receives any of the following: Special Education Bilingual 504 Plan**

2nd Student's Name: _____ **Birth Date:** _____
First Middle Last

Gender: ___F ___M **Current School:** _____ **Grade for 2017-18:** _____

****Please circle if your child receives any of the following: Special Education Bilingual 504 Plan**

3rd Student's Name: _____ **Birth Date:** _____
First Middle Last

Gender: ___F ___M **Current School:** _____ **Grade for 2017-18:** _____

****Please circle if your child receives any of the following: Special Education Bilingual 504 Plan**

**Please note students receiving special services will be reviewed based on individual needs and class size regulations. Parents will be notified by Student Services Office with final school placement for 2017-18 school year to best meet individual learning needs in special education, bilingual education, and 504 plans.

Home Address: _____

Daytime Phone: _____ **Work Phone:** _____

I do not wish for my child to attend Washington Academy and my signature below acknowledges my option to decline enrollment. I understand I am responsible to provide transportation to Caledonia Elementary or Perry Elementary School, the current school offerings for WA decline.

I will receive confirmation no later than the week of August 1, 2017, of my child's placement. I understand determinations will be made at district discretion based on space availability.

Parent/Guardian Signature: _____

School Preference – Please Circle One: Caledonia Elementary Perry Elementary

For office use only: Date Submitted: _____ Time submitted: _____